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5741017 02/20/20 10 10 10 WIN

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public Inspection

_	For the 2009 cal	lendar year, or tax year beginning $10/01/08$, and ending $9/30/0$	9		
<u>~</u>	Check if applicable	Please C Name of organization ST JAMES CONFERENCE OF THE		D Emplo	yer identification number
ň	Address change	USE IRS OF ST VINCENT DE PAUL			,
님	-	label or David Annual A		93-	0964181
닏	Name change	type. Doing Business As Doing Business As type. Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Teleph	one number
	Initial return	See 435 S BAKER			
П	Termination	Specific City and All the specific and All the spec	.'	G Gross recei	pts\$ 265,060
亓	Amended return	tions MCMINNVILLE OR 97128		- G1000 1000	
믐		F Name and address of principal officer		H(a) is this a	group return for
Ш	Application pending	JIM BOTTEN		affiliate	· — =
		6594 MINERAL SPRINGS RD NE		H(b) Are all include	affiliates 🖂 , 🖂
		CARLTON OR 97111			attach a list (see instructions)
_	Tax-exempt status	[32] 3 A 4 () [() [() () () () () () ()	-	1	(
'	Website ► N			H(c) Group e	exemption number
	Type of organization		Year of formation 1	984	M State of legal domicile OR
		ımmary			
·		escribe the organization's mission or most significant activities			
	TO P	ROVIDE ASSISTANCE TO THE POOR, PROVIDING FUNDS FOR	R FOOD, CL	OTHING	AND
nce		TER TO INDIVIDUALS AND FAMILIES	•	•	•
Activities & Governance					
Š	2 Check the	is box if the organization discontinued its operations or disposed of more than	 25% of its asse	ts.	• • •
ဗိ		of voting members of the governing body (Part VI, line 1a)	. 20 % 0. 10 4000	3	9
•ර් ග		of independent voting members of the governing body (Part VI, line 1b)	•	4	9
ij		nber of employees (Part V, line 2a)		5	8
₹		• • • • • • • • • • • • • • • • • • • •		. 6	40
ĕ	F	nber of volunteers (estimate if necessary)		7a	
		ss unrelated business revenue from Part VIII, line 12, column (C) ated business taxable income from Form 990-T, line 34	•	7b	0
	b Net unrei	ated business taxable income from Form 990-1, line 34	Prior Ye		Current Year
	8 Contributi	ions and grants (Part VIII, line 1h)	68	3,528	52,597
J.		service revenue (Part VIII, line 2g)	209	9,075	209,839
Revenue	1	nt income (Part VIII, column (A), lines 3, 4, and 7d)		4,328	2,624
æ		enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			
		enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	283	1,931	265,060
				5,749	79,684
	14 Populity a	nd similar amounts paid (Part IX, column (A), lines 1-3RECEIVED		7	······································
	45 0-1	other compensation, employee benefits (Part IX, column (A), line 4) other compensation, employee benefits (Part IX, column (A), lines 5–10) onal fundraising fees (Part IX, column (A), line 1 UN 1 2010	120	0,904	131,633
ses	15 Salaties,	other compensation, employee benefits (Part IX, column (A), lines 5–10) onal fundraising fees (Part IX, column (A), line 1 UN 1 2010		7	
en	h Tatal fine	draising expenses (Part IX, column (D), line 25)			
Expenses	17 Other even	pages (Part IX, column (A) lines 11a, 11d, 11f-240, 00 DEN 11	68	3,588	68,982
	I II Ottlet exp	penses (Part IX, column (A), lines 11a-11d, 11f-24f) OGDEN, UT enses. Add lines 13-17 (must equal Part IX, column (A), line 25)		5,241	280,299
		less expenses Subtract line 18 from line 12		5,690	-15,239
- ×		less expenses Subtractime to nontime 12	Beginning o		End of Year
Assets or	20 Total ass	ets (Part X, line 16)	543	3,624	528,384
Ass	21 Total liabi	ilities (Part X, line 26)			
25	31	s or fund balances Subtract line 21 from line 20	543	3,624	528,384
P		gnature Block			
} .	Lind	ler penalties of periury. I declare that I have examined this return, including accompanying schedule	s and statements, a	nd to the best	of my knowledge
5	and	belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all int	ormation of which p	reparer has a	ny knowledge
Sig	an A	(In of Givans		5.	25·10
He		Signature (Lofficer		Date	
		Jane H. Evans Treasurer			
		Type or print name and title			
		Date Date	Check	f	Preparer's identifying number
Pai	IA A 3	parer's	o /a o self-	. 🔽	(see instructions) P00545695
	eparer s		U/IU employ		► 81-0562923
	e Only	105 NE 3DD CE		EIN	F 01 0302323
	/ Firse	, , , , , , , , , , , , , , , , , , ,		Phone	503-434-1113
				no 🕨	
_		s this return with the preparer shown above? (see instructions) act and Paperwork Reduction Act Notice, see the separate instructions.			Yes No Form 990 (2008)
заΔ	EOF Privacy A	or and Paperwork Kenucijon ACI Notice. See the SADATATE INSTRUCTIONS.			1 UIIII 434 (2000)

DAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

0) (Revenue \$

266,095 (Must equal Part IX, Line 25, column (B))

4d Other program services. (Describe in Schedule O.)

4e Total program service expenses > \$

79,684 including grants of \$

Form 990 (2008) ST JAMES CONFERENCE OF THE SOCIETY 93-0964181

Checklist of Required Schedules Part IV Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," X complete Schedule A X Is the organization required to complete Schedule B, Schedule of Contributors? 2 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to X 3 candidates for public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes." complete X 4 Schedule C. Part II Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) 5 notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete X 6 Schedule D. Part I Did the organization receive or hold a conservation easement, including easements to preserve open space, X the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes." X complete Schedule D, Part III 8 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," X complete Schedule D, Part IV Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V X 10 10 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, 11 X 11 Parts VI, VII, VIII, IX, or X as applicable Did the organization receive an audited financial statement for the year for which it is completing this return 12 X that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII 12 X 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 X Did the organization maintain an office, employees, or agents outside of the U.S.? 14a 14a Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, X 14b business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any 15 X organization or entity located outside the United States? If "Yes," complete Schedule F, Part II 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance 16 X to individuals located outside the United States? If "Yes," complete Schedule F, Part III 16 X 17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I 17 X Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 18 18 X Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 19 19 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 20 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 21 X 22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete 23 X 23 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions X 24a 24b-24d and complete Schedule K If "No," go to question 25. Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c to defease any tax-exempt bonds? 24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction X with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified X person from a prior year? If "Yes," complete Schedule L, Part I 25b 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or X disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or X substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III

Part IV Checklist of Required Schedules (continued) Yes No During the tax year, did any person who is a current or former officer, director, trustee, or key employee. 28 Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, X 28a Have a family member who had a direct or indirect business relationship with the organization? If "Yes," X complete Schedule L. Part IV 28b Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a X professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV 28c Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M X 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 X 30 conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 X Schedule N, Part II 32 . . . Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 X sections 301,7701-2 and 301,7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, 34 X 34 III, IV, and V, line 1 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete 35 X Schedule R, Part V, line 2 35 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 36 X 36 organization? If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part

Form 990 (2008)

P	art V Statements Regarding Other IRS Filings and Tax Compliance					
	•				Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	1 1]			
	U.S Information Returns Enter -0- if not applicable	1a	0		ļ	ĺ
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0		Ì	-
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	portabl	е			
	gaming (gambling) winnings to prize winners?	_		1c		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			- 1		
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	_8	_		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	rns?		2b		X
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see					
	instructions)					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	d by				
	this return?		•	_3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	authori	ty			İ
	over, a financial account in a foreign country (such as a bank account, securities account, or other fir	ancial				
	account)?			4a		X
b	If "Yes," enter the name of the foreign country					
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign	Bank				
	and Financial Accounts					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	tion?		5b		X
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity					
	Regarding Prohibited Tax Shelter Transaction?			5c		
6a	Did the organization solicit any contributions that were not tax deductible?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ns or				
	gifts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).			i		
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more	than				
	\$75?			7a		<u> </u>
þ	If "Yes," did the organization notify the donor of the value of the goods or services provided?		•	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	S]	
	required to file Form 8282?			7c		X
ď	If "Yes," indicate the number of Forms 8282 filed during the year	7d		-		
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p	ersonal				77
	benefit contract?			7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	act?	•	7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7g		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C	as		,,		x
_	required?			7h		<u> </u>
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and sect				ı	
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a spon	somig		8		x
_	organization, have excess business holdings at any time during the year?		• • • • • • • • • • • • • • • • • • • •	1		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			9a	- 1	x
a	Did the organization make any taxable distributions under section 4966?		•	9b		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?	٠	•	30		
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12	10a				
a	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10a	-	 		
b 14	·	ן עטי		┥		
11	Section 501(c)(12) organizations. Enter Gross income from members or shareholders	11a			- 1	
a	Gross income from other sources (Do not net amounts due or paid to other sources against			√		
b	amounts due or received from them.)	11b			- 1	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form			12a	- 1	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			\neg	
	n 1001 onto the amount of the entering interior of received at a contract and received					

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Sec	ction A. Governing Body and Management			
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the			
	circumstances, processes, or changes in Schedule O See instructions.			
1a	Enter the number of voting members of the governing body			ļ
b	Enter the number of voting members that are independent		ł	1
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following		l	
а	The governing body?	8a	x	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9a	Does the organization have local chapters, branches, or affiliates?	9a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations			
	must describe in Schedule O the process, if any, the organization uses to review the Form 990	10		X
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		X
Sec	tion B. Policies		<u> </u>	
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how-this is done	12c		
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:		l	
а	The organization's CEO, Executive Director, or top management official?	15a		X
b	Other officers or key employees of the organization?	15b		X
	Describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed OR			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)	•		•
	available for public inspection. Indicate how you make these available. Check all that apply.			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest			
	policy, and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization ▶ BETTYE MILLER 4350 S BAKER ST			
MC	MINNVILLE OR 97128			

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. . Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors; institutional trustees; officers; key employees, highest compensated employees; and former such persons

Check this box if the c			e an	y off	icer,	direc	ctor,	trustee, or key employee.		
(A)	(B) Average	Pos	ition ((l chec	C) k all i	that a	(vlaa	(D) Reportable	(E) Reportable	(F) Estimated
Name and Title	hours per week	or director		Officer		Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
JIM BOTTEN	_	1								
PRESIDENT	0	X	<u> </u>	X				0	0	0
DICK BOTTI										_
VICE-PRES	0	X	├	X		\vdash	_	0	0	0
LARRY PARR	0	x		x				О	o	0
VICE-PRES BRENDA BOTTE		┼≏		^				0		0
SECRETARY	0	x		x				О	o	0
JANIE EVANS	<u> </u>	+**				\vdash				
TREASURER	0	X		x				o	o	0
KAREN THWAIT		\top			_				·	
• •	0	x						0	0	0
TERRY MILLER										
	0	X						0	0	0
LESLIE TOEVE	0	x						0	o	0
KAREN DAVIS	0	x						0	0	0
				-						

Form 990 (2008) ST JAMES CONFERENCE OF THE SOCIETY 93-0964181

(A) Name and title '	(B) Average	\vdash	_	chec	_	that a			(E) Reportable compensation	Estir	F) nated	
•	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	ot compe fron organ and r	unt of her ensation the ization elated zations	
,	-											
										·		
.,												
										·		
				_								
•												
1b Total 2 Total number of indiv	viduals (including those in	1a) v	vho r	ecei	ived	more	▶ e tha	ın \$100,000 ın reportable co	ompensation from the			
organization ▶ 0											Tv	
	list any former officer, dire ? If "Yes," complete Sched							yee, or highest compensate	ed	3	Yes	No X
the organization and	ted on line 1a, is the sum or related organizations greated	of repoter t	porta han s	ble (\$150	com ₁ 0,000	oens)? If '	atıor "Yes	n and other compensation f s," complete Schedule J for	rom such	4		x
5 Did any person listed services rendered to	d on line 1a receive or accr the organization? If "Yes,"	ue c	omp iplet	ensa e Sc	ation :hedi	from ule J	any for s	y unrelated organization for such person		5		x
Section B. Independent	Contractors											
Complete this table to compensation from to the compensation from the compensation	he organization	ensat	ed ir	ndep	ende	ent c	ontra	actors that received more the			(C)	
	Name and business address							Descripti	(B) on of services	c	(C) ompensa	ation
											_	
									···			
												
				-								
		ding	thos	e in	1) w	ho re	ceiv	red more than \$100,000 in			ı	
compensation from t	he organization >									0 Form	990	(2008)

Form 990 (2008) ST JAMES CONFERENCE OF THE SOCIETY 93-0964181 Part VIII Statement of Revenue (A) Total revenue (B) Related or (C) (D) Unrelated Revenue exempt business excluded from tax function under sections revenue 512, 513, or 514 revenue Contributions, gifts, grants and other similar amounts 1a Federated campaigns 1a 1b b Membership dues c Fundraising events 1c d Related organizations 1d 4,272 e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 48,325 1f g Noncash contributions included in lines 1a-1f 52,597 h Total. Add lines 1a-1f Program Service Revenue Busn. Code 209,839 209,839 2a SALE OF DONATED MDSE b d f All other program service revenue 209,839 Total. Add lines 2a-2f Investment income (including dividends, interest, and 2,624 2,624 other similar amounts) Income from investment of tax-exempt bond proceeds ▶ Royalties (ı) Real (II) Personal 6a Gross Rents b Less rental exps Rental inc or (loss) Net rental income or (loss) Gross amount from (II) Other (i) Securities sales of assets other than inventory Less cost or other basis & sales exps c Gain or (loss) Net gain or (loss) 8a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c) See Part IV. Ine 18 b Less direct expenses c Net income or (loss) from fundraising events 9a Gross income from gaming activities. See Part IV, line 19 b Less direct expenses \blacktriangleright c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less. cost of goods sold b Net income or (loss) from sales of inventory Miscellaneous Revenue Busn. Code 11a b C All other revenue Total. Add lines 11a-11d

265,060

212,463

Total Revenue, Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c,

9c, 10c, and 11e

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	• All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).										
	o not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundralsing expenses						
1											
-	organizations in the U.S. See Part IV, line 21										
2	Grants and other assistance to individuals in		•		- <u> </u>						
	the U.S See Part IV, line 22	79,684	79,684								
3	Grants and other assistance to governments,				-						
	organizations, and individuals outside the										
	U.S See Part IV, lines 15 and 16										
4	Benefits paid to or for members										
5	Compensation of current officers, directors,										
	trustees, and key employees										
6	Compensation not included above, to disqualified										
	persons (as defined under section 4958(f)(1)) and										
	persons described in section 4958(c)(3)(B)										
7	Other salaries and wages ,	119,901	109,350	10,551							
8	Pension plan contributions (include section 401(k)										
	and section 403(b) employer contributions)				<u> </u>						
9	Other employee benefits	44 500	10 500	1 000							
10	Payroll taxes	11,732	10,700	1,032							
11	Fees for services (non-employees):		,								
a	Management										
þ	•	925		925							
C	Accounting	923		925							
a	Lobbying Professional fundraising services See Part IV, line 17										
e	Investment management fees										
g	Other										
12	Advertising and promotion	166	166								
13	Office expenses	748		748							
14	Information technology	1,505	1,505		· **						
15	Royalties										
16	Occupancy			_							
17	Travel	· · · · · · · · · · · · · · · · · · ·									
18	Payments of travel or entertainment expenses										
	for any federal, state, or local public officials										
19	Conferences, conventions, and meetings										
20	Interest										
21	Payments to affiliates	10 674	10 674								
22	Depreciation, depletion, and amortization	19,674 10,222	19,674 10,222								
23	Insurance	10,222	10,222		<u>-</u> .						
24	Other evenese Hamiza evenese not										
24	Other expenses Itemize expenses not covered above (Expenses grouped together										
	and labeled miscellaneous may not exceed			ļ							
	5% of total expenses shown on line 25 below.)										
а	UTILITIES	15,997	15,997								
b	MAINTENANCE & REPAIRS	10,919	10,919								
С	SUPPLIES	5,740	5,740								
đ	WORKERS COMP	1,392	1,392								
е	OTHER	1,348	400	948							
f	All other expenses	346	346								
25	Total functional expenses. Add lines 1 through 24f	280,299	266,095	14,204							
26	Joint Costs. Check here ► if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs										
	from a combined educational campaign and fundraising solicitation				- 000						

SV4181X 05/20/2010 10 16 AM

Form 990 (2008) ST JAMES CONFERENCE OF THE SOCIETY 93-0964181

_P	art)	K Balance Sheet					,		
					(A) Beginning of year			B)	
	1 .				300		Endo	f year	299
	1	Cash—non-interest bearing		-	190,813		1	95,	
	2	Savings and temporary cash investments	•	-	190,013	3		90,	930
	3	Pledges and grants receivable, net		• • -		4	-		
	4	Accounts receivable, net Receivables from current and former officers, directors,	tru into or	· · · -		-	 		
	5					5			
		employees, or other related parties. Complete Part II of		' '		3			
	6	Receivables from other disqualified persons (as defined							
		4958(f)(1)) and persons described in section 4958(c)(3)(D) COII	ipiete		6	Į		
	_	Part II of Schedule L				7			
ets	7	Notes and loans receivable, net		· · · -		8			
Assets	8	Inventories for sale or use		. -		9			
⋖	9	Prepaid expenses and deferred charges	1 -0-1	566,008		9			
	10a	Land, buildings, and equipment cost basis	10a	300,000					
	Ь	Less: accumulated depreciation Complete	401	233,861	352,511	40-	2	32,	1 /1 7
	İ	Part VI of Schedule D	10b	255,861	332,311		د	<u> </u>	13/
	11	Investments—publicly traded securities		-		11			
	12	Investments—other securities See Part IV, line 11		-		12			
	13	Investments—program-related See Part IV, line 11		-		13			
	14	Intangible assets		·		14			
	15	Other assets See Part IV, line 11		-	543,624	15	E	28,	201
	16	Total assets. Add lines 1 through 15 (must equal line 34	1)		343,624	16		<u> 20,</u>	304
	17	Accounts payable and accrued expenses				17			
	18	Grants payable		-	··-·	18			
	19	Deferred revenue				19			
S	20	Tax-exempt bond liabilities				20	·		
Liabilities	21	Escrow account liability. Complete Part IV of Schedule D	•	-		21			
Ē	22	Payables to current and former officers, directors, truster							
iak		employees, highest compensated employees, and disqu	alified						
_	i	persons. Complete Part II of Schedule L		. –		22			
	23	Secured mortgages and notes payable to unrelated third	parties	, ,		23			
	24	Unsecured notes and loans payable		<u> </u>		24			
	25	Other liabilities Complete Part X of Schedule D				25			
	26	Total liabilities. Add lines 17 through 25	<u> </u>			26			
or Fund Balances		Organizations that follow SFAS 117, check here ▶	and						
Ĭ		complete lines 27 through 29, and lines 33 and 34.			400 400		_	06	COE
als	27	Unrestricted net assets	•		482,408	27		<u>06,</u>	
<u>m</u>	28	Temporarily restricted net assets			61,216	28		21,	999
Ĕ	29	Permanently restricted net assets		, <i>,</i>		29			
Ţ		Organizations that do not follow SFAS 117, check her	e▶						
ō		and complete lines 30 through 34.							
ţ	30	Capital stock or trust principal, or current funds			 -	30			
Se	31	Paid-in or capital surplus, or land, building, or equipment				31			
Ā	32	Retained earnings, endowment, accumulated income, or	other fu	unds .	F 4 2 C C A	32		~~	204
Net Assets	33	Total net assets or fund balances	٠.		543,624	33		28,	
	34	Total liabilities and net assets/fund balances			543,624	34		28,	<u> 384</u>
Pa	art X	Financial Statements and Reporting				-			
			[5	X Accrual Othe	n-			Yes	No
1		. ,					2a		x
2a		re the organization's financial statements compiled or rev				•	2b		X
		re the organization's financial statements audited by an in							-
C		es" to lines 2a or 2b, does the organization have a commend to lines 2a or complation of its financial statements a					2c		
_							20		
38		a result of a federal award, was the organization required	to unue	igo an audit or addits as se	A TOTAL IN		3a		ı
.		Single Audit Act and OMB Circular A-133? 'es," did the organization undergo the required audit or au	ıdıts?		•		3b		
u		co, die die organization andergo the required addit of ac							

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

ST JAMES CONFERENCE OF THE SOCIETY

OF ST VINCENT DE PAUL

Employer identification number 93-0964181

Pa	art I	Reas	son for Public Charity	Status (All organization	s must	comple	te this	part.)	(see	nstruc	ctions)		
The	orga	nization is no	t a private foundation becau-	se it is. (Please check only one	organiza	tion.)							
1	X	A church, co	onvention of churches, or ass	sociation of churches described	ın sectio	n 170(b)(1)(A)(i).						
2	П	A school des	scribed in section 170(b)(1)((A)(ii). (Attach Schedule E.)									
3	П			ice organization described in se	ction 170)(b)(1)(A)	(iii). (Att	ach Sch	edule F	1)			
4	П			ed in conjunction with a hospital							ospital's name,		
	_	city, and sta						,	•				
5		•	•	of a college or university owned	 I or opera	ted by a c	lovernm	ental un	it descr	ibed in	•	•	
•		_	(b)(1)(A)(iv). (Complete Part		•	, .							
6	\Box			governmental unit described in s	section 1	70(b)(1)(<i>A</i>	λ)(ν).						
7	Н			substantial part of its support fr				from the	e aener	al public	3		
•	ш				J				3		-		
8	П	described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)											
9	H			1) more than 33 1/3 % of its sur		contribut	lions mi	embersh	no fees	and or	oss		
3	لــا			npt functions—subject to certain									
				nd unrelated business taxable in									
				0, 1975 See section 509(a)(2)				.,					
10				exclusively to test for public saf				(see in	structio	ns)			
11	Н	-	· ·	exclusively for the benefit of, to									
• •	ш			ed organizations described in s							1		
				the type of supporting organizati							-		
		a Type		c Type III–Function			d	$\overline{}$	e III–O	ther			
e				ganization is not controlled direct									
•	ш			and other than one or more pul							1		
			section 509(a)(2)	, and a second part of the secon			,						
f				ermination from the IRS that it is	a Type I	. Type II.	or Type	III suppe	ortina				
•			check this box			, . ,							\Box
		-		tion accepted any gift or contrib	ution fron	n anv of th	ne				•		ш.
g		following per	-	, 3		•							
				ontrols, either alone or together	with pers	ons descr	ibed in (ii)			Г	Yes	No
				f the supported organization?			,	,			11g(i)		
		, ,	member of a person describ		• •	•		•	•		11g(ii)		
			•	described in (i) or (ii) above?				•			11g(iii)		
h				he organizations the organization	noaqaus na	ts.	• ••		• •		. [
				<u> </u>	T		AA Did.		6.0	la tha	(vill) Ama	.nt of	
(1)		of supported	(ii) EIN	(iii) Type of organization (described on lines 1–9		organization isted in your		ou notify nization in	organizal	ls the ion in col	(vil) Amou suppo		
	o.g.			above or IRC section		document?	col (i)	of your	(i) organi	zed in the			
				(see instructions))			<u> </u>	port?	 	S?			
					Yes	No	Yes	No	Yes	No			
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		<u>.</u>			 								
					1	[i							
					 	 							
otal													

more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Schedule A (Form 990 or 990-EZ) 2008

18

14	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)		
	organization, check this box and stop here		▶□
Sec	ction C. Computation of Public Support Percentage		
15	Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	%
16	Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	%
Sec	tion D. Computation of Investment Income Percentage		
17	Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	%
18	Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	<u></u> %
I9a	33 1/3 % support tests—2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line		

17 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization 33 1/3 % support tests—2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) Part IV Supplementa	I Information. Co	omplete this	part to provide	the explana	ation require	d by Part II,	line 10;
Part II, line 17	a or 17b; or Part	t III, line 12. F	rovide any otr	er additiona	al informatio	n. (see instr	uctions)
						•	
		•					
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SCHEDULE D

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047 2008

Open to Public

Employer identification number Name of the organization ST JAMES CONFERENCE OF THE SOCIETY 93-0964181 OF ST VINCENT DE PAUL Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if Part I the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 2 Aggregate contributions to (during year) Aggregate grants from (dunng year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV. line 7 Part II Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Preservation of certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year 2a a Total number of conservation easements 2b Total acreage restricted by conservation easements 2c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ __ _ _ _ _ Number of states where property subject to conservation easement is located \[\bigs_ \subseteq Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year 6 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year > \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)? ... In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Sche		CONFERENCE O			93-0964		Page 2
Pa	art III Organizations Maintaining						sets (continued)
3	Using the organization's accession and othe items (check all that apply).	r records, check any of the	e following that are a	significa	int use of its coll	ection	_
а	Public exhibition	d 🗍 Loan	or exchange prograi	ms			
b	Scholarly research	e Other	or oxoriarigo program				
	Preservation for future generations					. – – :	_
С							
4	Provide a description of the organization's concentration of the organization's concentration of the organization of the organ					se in	
5	During the year, did the organization solicit or assets to be sold to raise funds rather than to	o be maintained as part of	the organization's c	ollection?	?		Yes No
Pa	rt IV Trust, Escrow and Custoo Part IV, line 9, or reported	lial Arrangements . C an amount on Form	Complete if orga 990, Part X, line	inizatio e 21.	n answered	"Yes" to	Form 990,
1a	Is the organization an agent, trustee, custodi				ts not		
	included on Form 990, Part X?	·					Yes No
b	If "Yes," explain the arrangement in Part XIV	and complete the following	table:	•	•		_
_	, , do, o.p.a are arrangement are arrangement		•				Amount
_	Beginning balance					1c	
	Additions during the year	•	••••	•	•	1d	
				•	•	1e	
e				•	•	1f	
T -	Ending balance	000 D-+V !! 040	•	• •			П., П.,
	Did the organization include an amount on Fo					•	∐ Yes ☐ No
_	If "Yes," explain the arrangement in Part XIV.		nowared "Vee"	to Eoro	000 Dort IV	/ line 1/	
Pa	rt V Endowment Funds. Comp						
		(a) Current year	(b) Prior year	(C) 1W0	years back (d)	Three years	back (e) Four years back
1a	Beginning of year balance						
b	Contributions .		·				
С	Investment earnings or losses	·					
d	Grants or scholarships						
е	Other expenditures for facilities						
	and programs						
f	Administrative expenses						-
g	End of year balance						
2	Provide the estimated percentage of the year	end halance held as		<u> </u>			
	Board designated or quasi-endowment	%					
d L	_	"					
D							
	Term endowment ▶%				1 £ 41		
3a	Are there endowment funds not in the posses	ssion of the organization th	at are neid and adm	iinistered	i for the		
	organization by:						Yes No
	(i) unrelated organizations						3a(i)
	(ii) related organizations .						3a(ii)
b	If "Yes" to 3a(ii), are the related organizations	listed as required on Sche	edule R?				3b
4	Describe in Part XIV the intended uses of the						
Pa	rt VI Investments-Land, Buildi	ings, and Equipmen	t. See Form 990	<u>0, Part</u>	X, line 10.		
_	Description of investment	(a) Cost or other basis	(b) Cost or oth	ier	(c) Deprecia	tion	(d) Book value
		(investment)	basis (other)				
1a	Land		53	,000			53,000
	Buildings						
	Leasehold improvements						
	Equipment	-	 				·
			513	,008	233	3,861	279,147
	Other Add lines 1a-1e (Column (d) should equal F	orm 990 Part X column /		, , , , , ,		<u></u>	332,147

Schedule D (Form 990) 2008 ST JAMES CONFERENCE C	OF THE SOCIETY	93-0964181	Page_
Part VII Investments—Other Securities. See Form 99			
 (a) Description of security or category 	(b) Book value	(c) Method o	
(including name of security)		Cost or end-of-yea	ar market value
Financial derivatives and other financial products			
Closely-held equity interests			
Other			
			
		- · · · · · · · · · · · · · · · · · · ·	
Fotal. (Column (b) should equal Form 990, Part X, col (B) line 12.)	<u> </u>	475	
Part VIII Investments—Program Related. See Form 99	00 Part X line 13		
(a) Description of investment type	(b) Book value	(c) Method of	valuation
(a) Description of investment type	(4, 200 15.65	Cost or end-of-year	
<u> </u>			
	<u> </u>		
		16/14/	
	,		· - · · · · · · · · · · · · · · · · · ·
		·	, » , ,, ,, , , , , , , , , , , , , , ,
	 		
		·	
Total. (Column (b) should equal Form 990, Part X, col. (B) line 13.)	 		
Part IX Other Assets. See Form 990, Part X, line 15.			
(a) Description			(b) Book value
			.
	· · · · · · · · · · · · · · · · · · ·		
			<u></u>
			•
		-	
		·····	
Tatal (Oakiman (h) should serial Form 000 Port V cal (P) line 15		•	
otal. (Column (b) should equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. See Form 990, Part X, line 25			
(a) Description of liability	(b) Amount		
	(b) / mount		
ederal income taxes			
			
			-
otal. (Column (b) should equal Form 990, Part X, col (B) line 25)			
Part XIV, provide the text of the footnote to the organization's financial state	ements that reports the orga	anızatıon's lıability for	
ncertain tax positions under FIN 48			

	edule D (Form 990) 2008 ST JAMES CONFERENCE OF THE SOCIETY 93-096418	31	Page 4
Р	art XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements	1	
1	Total revenue*(Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	_ .
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	<u> </u>
9	Total adjustments (net). Add lines 4-8	9	
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	<u>.</u>
P	art XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	turn	
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а		-	
b	• • • • • • • • • • • • • • • • • • • •		
С	, , , , , , , , , , , , , , , , , , , ,	4	
d	Other (Describe in Part XIV)		
е	Add lines 2a through 2d	_2e	······································
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIV)		
С	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part 1, line 12)	5	
Pa	art XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per F	Retur	<u>n</u>
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities 2a		
þ			
C	Losses reported on Form 990, Part IX, line 25	[]	
d	Other (Describe in Part XIV)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1	
а	Investment expenses not included on Form 990, Part VIII, line 7b		
	Other (Describe in Part XIV)		
	Add lines 4a and 4b	4c	
	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	5	
	ert XIV Supplemental Information		
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part IV, lines 1b		
nd 2	2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b		
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SV4181X

SCHEDULE (Form 990)

► Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. Grants and Other Assistance to Organizations, Governments, and Individuals in the U.S.

OMB No 1545-0047* 2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service	ONEGEROOD SEWAL	Complete if the o	organization a	■ Attach to Form 990.	▼ Complete If the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. ▼ Attach to Form 990.	es 21 or 22.		Open to Public Inspection	
e organization		au.	OCIET	1		Employer identification 93-0964181	Employer identification number 93-0964181		
Part I General II	General Information on Grants and Assistance	Assistance							
1 Does the organization the selection criteria us 2 Describe in Part IV the	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	e amount of the grace? se? toring the use of	ants or ass trant funds	istance, the grantees' in the United States.	eligibility for the grants	or assistance, and	T.	Yes X No	
Part II Grants ar Form 990 Part IV ar	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	rernments an cipient that registrational s	d Organi seived m pace is r	zations in the Un ore than \$5,000. eeded	Organizations in the United States. Complete if the organization answered "Yes" on sived more than \$5,000. Check this box if no one recipient received more than \$5,000 ace is needed	plete if the organo no one recipier	anization answ nt received mo	re than \$5,000. Use ☒️	
1 (a) Name and a	(a) Name and address of organization	(p) EIN	(c) IRC section	d) Amount of cash grant	(d) Amount of cash grant (e) Amount of non-cash (f) Method of valuation (book, FMV, appraisa).	(f) Method of valuation (book, FMV, appraisal,	(g) Description of	ant	
or g	or government		ıt applicable		assistance	other)	non-cash assistance	or assistance	
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2 Enter total number of section 501(c)(3) and Enter total number of other organizations	Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations	rganizations				:			

Schedule I (Form 990) 2008

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

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Schedule I (Form 990	Schedule (Form 990) 2008 ST JAMES CONFERENCE OF THE	VFERENCE OF TH	E SOCIETY 9.	93-0964181		Page 2
Part III Gra	Grants and Other Assistance to Individuals in the United Use Schedule I-1 (Form 990) if additional space is needed.	to Individuals in the if additional space is	United States. Compeeded.	plete if the organiza	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.	rm 990, Part IV, line 22.
(a) Type	(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(f) Description of non-cash assistance
		recipients	cash grant	non-cash assistance	FMV, appraisal, other)	•
CLOTHING,	CLOTHING, FOOD AND HOUSIN	21016	79,684			
,						
Part IV Sup	plemental Information. C	omplete this part to p	provide the informatic	on required in Part I,	Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	ional information.
	:		:	:		
	:	-				:
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Schedule I (Form 990) 2008

SCHEDULE O (Form 990) **Supplemental Information to Form 990**

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

ST JAMES CONFERENCE OF THE SOCIETY OF ST VINCENT DE PAUL

Employer identification number 93-0964181

•										
SCHEDULE O - ADDITI	ONAL	INFORM	ATION							
SPECIFIC ASSISTANCE	6731	CASES	COMPRISE	OF	12308	ADULTS	AND	8,708	CHILD	REN
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Form **4562**

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

OMB No 1545-0172 Attachment Sequence No

Name(s) shown on return

► See separate instructions. ► Attach to your tax return. JAMES CONFERENCE OF THE SOCIETY ST

OF ST VINCENT DE PAUL

Identifying number 93-0964181

	ness or activity to which this form relates NDIRECT DEPRECIAT:	ION								
P	art I Election To Exper	se Certain Pro	perty Under Se	ection	179	·				-
	Note: If you have a	any listed prope	rty, complete F	Part V	before yo	u comp	olete P	art I.		
1	Maximum amount. See the instruc								1	250,000
2	Total cost of section 179 property	•					•		2	
3	Threshold cost of section 179 prop			Instruct	ions)	•	•	•	3	800,000
4	Reduction in limitation. Subtract li				•		•	•	4	
5	Dollar limitation for tax year Subtract lin				g separately,	see instruc	tions		5	
	(a) Description				t (business us			Elected cos	t	
6					•					
<u> </u>	·		····							
7	Listed property Enter the amount	from line 29				7				1
8	Total elected cost of section 179 p	•		nes 6 an	 d 7			•	8	
9	Tentative deduction Enter the sm	· ·			•				9	
10	Carryover of disallowed deduction				•				10	
11	Business income limitation Enter		·	ss than :	zero) or line	 5 (see in:	struction	ns)	11	
12	Section 179 expense deduction A					- (, .	12	
13	Carryover of disallowed deduction					13			· · · · ·	
	e: Do not use Part II or Part III below								•	<u> </u>
	art II Special Depreciati				on (Do no	at inclu	de list	ed nron	erty)	(See instructions.)
14	Special depreciation allowance for						<u>ac 1150</u>	ca prop	<u> </u>	(COO Incardottorio:)
14	during the tax year (see instruction		outer than hatcu pro	openty) p	nacca in sci	* 100			14	175
	• ,	•		• • • • • • • • • • • • • • • • • • • •					15	
15	Property subject to section 168(f)(•		• •		•	16	17,451
16 Da	Other depreciation (including ACR art III MACRS Depreciation)		udo listed prop	orty)	See instr	uctions	. 1		10	1,,101
Р	art III WACKS Depreciati	ion (Do not inci	Secti		OCC IIISII	-	·. <i>)</i>			
	MACRS deductions for assets place	and in control in tax					-		17	2,013
17						ccounte e	· ·	. • 🗆	- ''	2/022
18	If you are electing to group any assets p	Assets Placed in Se							/stem	
	Jection B—F	(b) Month and	(c) Basis for depr		(d) Recovery			5,41,61, 6,	, 5, 5, 11	I
	(a) Classification of property	year placed in	(business/investm	ent use	period	(e) Cor	vention	(f) Me	thod	(g) Depreciation deduction
10-	2	service	only-see instruc	illoris)		-				
<u>19a</u>	3-year property			175	5.0	H	7	200	DB	35
<u>b</u>	5-year property			1,3	3.0	11.	-		טט	
<u> </u>	7-year property									
_ <u>d</u> _	10-year property									
<u>e</u>	15-year property			-						
<u>f</u>	20-year property				05		-	C/I		
g	25-year property				25 yrs.			S/L		
h	Residential rental				27.5 yrs	MI		S/L		-
	property				27.5 yrs	M		S/L		
i					39 yrs	MI		S/L		
	property				11-1 41	MI		<u>S/L</u>		
		sets Placed in Serv	rice During 2008 1	ax Year	Using the A	Aiternativ	e Depre			<u> </u>
	Class life							S/L		·
	12-year				12 yrs			<u>S/L</u>		
	40-year				40 yrs	MI	VI	S/L		
	irt IV Summary (See ins									
21	Listed property Enter amount from	•		•		<u>.</u>			21	
22	Total. Add amounts from line 12, li	_						i		40 684
	Enter here and on the appropriate			corpora	ations—see	instr			22	19,674
23	For assets shown above and place	=								
	enter the portion of the basis attribu					23				4500
or F	Paperwork Reduction Act Notice, s	ee separate instru	ctions.							Form 4562 (2008